



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E429044**

1 0 5 27

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE # **15-001341**

LOCAL AGENCY CODING **0664**

TOTAL # OF UNITS **03** OBJECT STRUCK

TRIBAL RESERVATION

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #
DATE OF COLLISION **05** - **31** - **2015** **1628** **31** N ☐ E ☐ IN ☒ OF **0664**
S ☐ W ☐

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐
N. MACHIAS RD BLOCK NO. MILE POST

DISTANCE OF (REFERENCE OR CROSS STREET)
MILES ☐ N ☐ E ☐ **20 ST NE**
FEET ☐ S ☐ W ☐

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 4252398100**

LAST NAME **TRIVISONNO** FIRST NAME **PRISCILLA** MIDDLE INITIAL **A**

STREET NEW ADDRESS **319 119 DR SE**

CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **TRVIPA076R7** STATE **WA** SEX **F** D.O.B. **12** - **27** - **1993**

ON DUTY ☐ STATUS AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **APR5469** STATE **WA** VIN# **JM1BK323X71682563**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2007** MAKE **MAZD** MODEL **MAZHB** STYLE **SD** VEHICLE TOWED YES ☒ NO ☐ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **OWNED BY DRIVER**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **GEICO 4278-95-99-88**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE



UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 3605686193**

LAST NAME **PRATT** FIRST NAME **RICHARD** MIDDLE INITIAL **D**

STREET NEW ADDRESS **7618 MCALLISTER RD**

CITY **SNOHOMISH** ST **WA** ZIP **98290**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **PRATTRD465K1** STATE **WA** SEX **M** D.O.B. **05** - **21** - **1954**

ON DUTY ☐ STATUS AIRBAG **2** RESTR. **1** EJECT **2** HELMET USE **1** INJURY CLASS **5** NATURE OF INJURIES **BROKEN SHOULDER, PSS OTHER BROKEN BONES**

LICENSE PLATE # **0D0831** STATE **WA** VIN# **1HD1DJV14Y623097**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2000** MAKE **HDMC** MODEL **FLHTC** STYLE **MC** VEHICLE TOWED YES ☒ NO ☐ TOWED BY **R&R TOWING** GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **OWNED BY DRIVER**

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # **UNKNOWN**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE



OFFICER'S NAME (PRINT) **ROBERT MINER** BADGE OR ID # **095** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E429044**

CASE # **15-001341**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		PRATT CAROLINE K														
ADDRESS & PHONE #		7618 MCALLISTER RD SNOHOMISH WA 98290 3605686193														
SEX	F	D.O.B. MMDDYYYY	02	13	1956											
PASSENGER <input checked="" type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	2	SEAT POS.	12	AIRBAG	2	RESTR.	1	EJECT	2	HELMET USE	1	INJURY CLASS	5	NATURE OF INJURIES BROKEN SHOULDER, POS OTHER BROKEN BONES
NAME (LAST, FIRST, MIDDLE INITIAL)		CHRISTIAN STEFANI M														
ADDRESS & PHONE #		5125 WEBER RD SNOHOMISH WA 98290 4257377713														
SEX	F	D.O.B. MMDDYYYY	06	27	1972											
PASSENGER <input type="checkbox"/>	WITNESS <input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		MOORE ED D														
ADDRESS & PHONE #		3532 233RD NE GRANITE FALLS WA 98252 3609132205														
SEX	M	D.O.B. MMDDYYYY	02	11	1962											
PASSENGER <input type="checkbox"/>	WITNESS <input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Unit #2 was southbound on N. Machias Rd approaching the intersection of 20 ST NE. Unit #1 was at interesection on 20 ST NE (at a stop sign), waiting to make a left turn for northbound N. Machias Rd. Unit #1 did not see Unit #2 approaching and pulled out in front of it, failing to yeild the right of way. Unit #2 collidied with Unit #1. It should be noted that Unit #2 is a motorcycle which was pulling a small trailer (unit #3) Both the driver and passenger of Unit #2 were ejected off the bike. Both the driver and passenger of Unit #2 appeared to have possible broken shoulders each, and maybe other broken bones.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

ROBERT MINER

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

06-01-15 08:29 AM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

6/1/2015 8:30:29 AM

BADGE OR ID #	095	ORI #	WA0311900	TIME POLICE DISPATCHED	4:28 PM	TIME POLICE ARRIVED	4:29 PM
---------------	------------	-------	------------------	------------------------	----------------	---------------------	----------------



SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT



013197

REPORT NO. **E429044**

CASE # **15-001341**

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐

INTRASTATE ☐

UNIT #

USDOT

ICC #

VEHICLE TYPE

CARGO BODY
TYPE

CARRIER
NAME

CARRIER
ADDRESS

CITY

ST

ZIP

NAME
SOURCE

AXLES

GVWR

PLACARD

+

NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT #

3

MOTOR
VEHICLE

☒

PEDAL-
CYCLE

☐

PEDESTRIAN

☐

PROPERTY
OWNER

☐

DAMAGE THRESHOLD MET
YES ☒ NO ☐

PHONE

LAST NAME

NONE

FIRST NAME

MIDDLE
INITIAL

STREET
NEW ADDRESS

7618 MCALLISTER RD

CITY

SNOHOMISH

ST

WA

ZIP

98290

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S
LICENSE #

STATE

SEX

U

D.O.B.
MMDDYYYY

MMDDYYYY

ON DUTY ☐

STATUS

AIRBAG

9

RESTR.

9

EJECT

9

HELMET
USE

9

INJURY
CLASS

1

NATURE OF INJURIES

LICENSE
PLATE #

7113XE

STATE

WA

VIN#

1J9CP0919NT088755

TRAILER
PLATE #

7113XE

STATE

WA

TRAILER
PLATE #

STATE

VEH. YEAR

1992

MAKE

FNJ

MODEL

KWKKMP

STYLE

UT

VEHICLE TOWED
YES ☒ NO ☐

TOWED BY

R&R TOWING

GOV'T. VEHICLE
YES ☐ NO ☒

REGISTERED OWNER INFO. **RICHARD PRATT 7618 MCALLISTER RD SNOHOMISH WA 98290 D: 3605686193**

LIABILITY INSURANCE
IN EFFECT

INSURANCE CO
& POLICY #

UNKNOWN

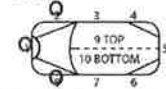
VEHICLE
LEGALLY
STANDING

YES ☐ NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



UNIT #

MOTOR
VEHICLE

☐

PEDAL-
CYCLE

☐

PEDESTRIAN

☐

PROPERTY
OWNER

☐

DAMAGE THRESHOLD MET
YES ☐ NO ☐

PHONE

LAST NAME

FIRST NAME

MIDDLE
INITIAL

STREET
NEW ADDRESS

CITY

ST

ZIP

GDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S
LICENSE #

STATE

SEX

D.O.B.
MMDDYYYY

MMDDYYYY

ON DUTY ☐

STATUS

AIRBAG

RESTR.

EJECT

HELMET
USE

9

INJURY
CLASS

NATURE OF INJURIES

LICENSE
PLATE #

STATE

VIN#

TRAILER
PLATE #

STATE

TRAILER
PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED
YES ☐ NO ☐

TOWED BY

GOV'T. VEHICLE
YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE
IN EFFECT

INSURANCE CO
& POLICY #

UNKNOWN

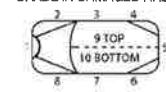
VEHICLE
LEGALLY
STANDING

YES ☐ NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

ROBERT MINER

06-01-15 08:29 AM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST DET

DATED:

PLACE SIGNED

BADGE
OR ID #

095

ORI
#

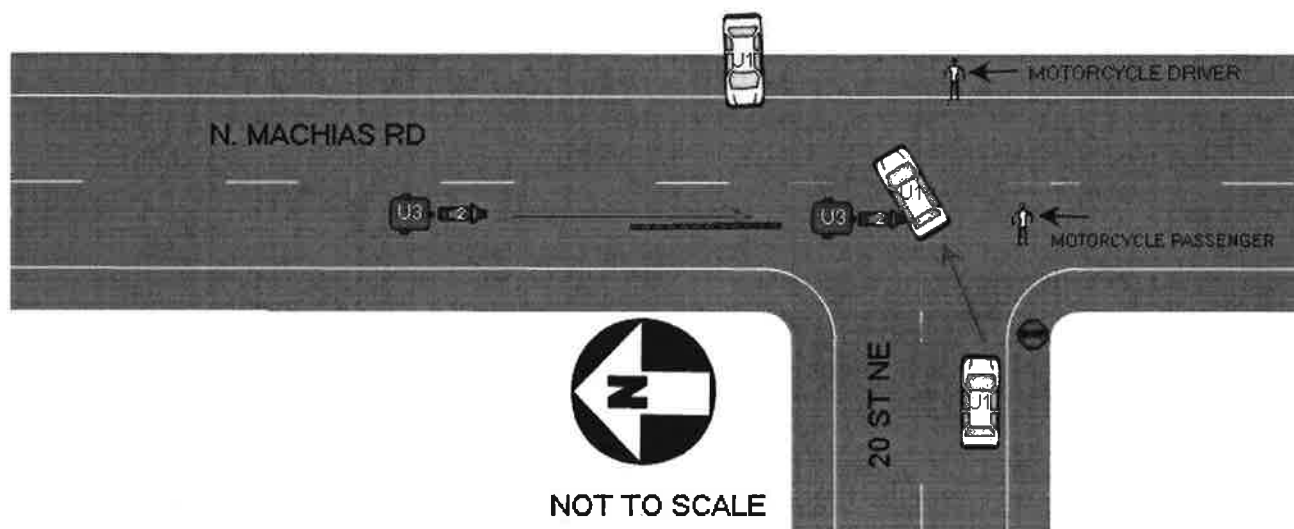
WA0311900

APPROVED BY
MINER

DATE
6/1/2015

PAGE **3**

OF **4**



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-1341

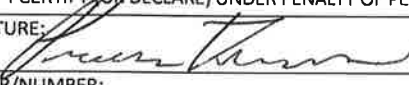
VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Trivisonno Priscilla A.	RACE W	ETH	SEX F	DOB 12-21-93	AGE 21	HGT 55	WGT 140	HAIR Brown	EYES Brown
STREET ADDRESS 319 119th Dr SE Lake Stevens		CITY		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE 425-334-1958		CELL PHONE 425-239-8100		PLACE OF EMPLOYMENT						
WORK PHONE		EMAIL ADDRESS								

I, Priscilla Trivisonno, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was stopped at the stop sign and took a left turn going down machias. The motorcycle with 2 passengers and a dog was coming straight ahead. I ~~drove~~ drove into the ditch to avoid hitting them and clipped the motorcycle.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 5/31/15	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: M. Arc	DATE SIGNED 5/31/15	LOCATION SIGNED Lake Stevens

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-1341

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Christian, Stefani M.	RACE W	ETH	SEX F	DOB 6/27/72	AGE 42	HGT 5'5	WGT 225	HAIR brown	EYES green
STREET ADDRESS 525 Weber Rd		CITY Snohomish		STATE WA		ZIP 98290		RES. STATUS		
HOME PHONE		CELL PHONE 425-737-7713		PLACE OF EMPLOYMENT Rainbow Federal, Inc						
WORK PHONE 425-333-4876		EMAIL ADDRESS Stefchristian@hotmail.com								

I, Stefani Christian, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

We were driving South on N. Machias Rd and I saw a motorcycle pulling a small trailer ahead of us going the same direction. They were about a 1/4 mile ahead when I noticed it lose control skid and stop in the middle of the road. A white car was in the same area when it happened, but we were too far away to see exactly what happened. The white car was coming the other direction on N. Machias than the motorcycle, but I can't be 100% positive. What I mostly saw was the skidding of the motorcycle + told my boyfriend to hurry + get there because there was an accident.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>SM Christian</u>	DATE SIGNED 5/31/15	LOCATION SIGNED 20th + N. Machias Rd.
OFFICER/NUMBER: <u>Minor</u>	DATE SIGNED 5/31/15	LOCATION SIGNED LK Stevens

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-1341

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) MOORE ED 17	RACE	ETH	SEX M	DOB 2-11-1962	AGE 53	HGT 5'8"	WGT 200	HAIR BRN	EYES GRN
STREET ADDRESS 5532-233rd N.E.		CITY GRANITE FALLS			STATE WA		ZIP 98252		RES. STATUS	
HOME PHONE		CELL PHONE 360-913-2205			PLACE OF EMPLOYMENT DITTA Rehd CTR.					
WORK PHONE 360 -360-568-2168		EMAIL ADDRESS Eddrewmoore1@aol.com.								

I, ED MOORE, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was Driving Northbound machias Rd Approaching 20th St. N.E. AT The intersection I heard A sudden crash - one vehicle From A stop pulled out in front of the one going South on machias Rd. I Do Not Recall IF it was The motor cycle or the car That was coming From 20th St. I heard NO Brakes - I immediately called 911 And Reported.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Ed Moore</u>	DATE SIGNED 5-31-2015	LOCATION SIGNED machias / 20th ST. N.E.
OFFICER/NUMBER: <u>Minor</u>	DATE SIGNED 5/31/15	LOCATION SIGNED LK Stevens

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD

- ☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____

- ☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

- ☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

UNIFORM WASHINGTON STATE

TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

15-001341

Ford
 5/31/15
 [Signature]

VEHICLE INFORMATION

VIN

1J9CPO919NT088755

LICENSE

7113-XE

STATE

WA

YEAR

92

MAKE

FNU

MODEL

KWKKMP

MILEAGE

☐ Digital

unreadable

STYLE

MTR

COLOR

BLU/WH

☐ Report of Sale

DRIVER

NAME (LAST, FIRST, MI)

PRATT, RICHARD D

STREET ADDRESS

7618 McALLISTER RD

CITY, STATE, ZIP CODE

SNODHOMISH, WA, 98290

PHONE

DOB

5/21/54

REGISTERED OWNER

NAME (LAST, FIRST, MI)

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

LEGAL OWNER

NAME (LAST, FIRST, MI)

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 5/31/15 AT _____ (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE RAND R

TO REMOVE THIS VEHICLE FROM 20th ST NE & MACHIAS RD (TOWING FIRM)

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

DOL TOW TRUCK NO. 3

DATE

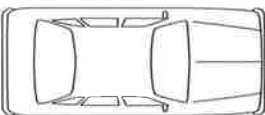
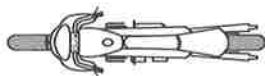
5-31-15

EQUIPMENT

- ☐ GLOVE BOX LOCKED
☐ KEYS []
☐ AUTO STEREO
☐ AUDIO TAPES / CD'S []
☐ CB RADIO
☐ RADAR DETECTOR
☐ TRUNK LOCKED
☐ SPARE TIRE
☐ JACK
☐ CHAINS
☐ OTHER _____

DAMAGE

- ☐ FRONT SHADE DAMAGED AREA
☐ R FRONT
☐ R SIDE
☐ R REAR
☐ L FRONT
☐ L SIDE
☐ L REAR
☐ REAR
☐ TOP
☐ UNDERCARRIAGE
☐ OTHER _____



EVIDENCE (DRIVER'S SIDE)

EVIDENCE (PASSENGER'S SIDE)

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE

X SKILROD 1132

BADGE NO. 132

COUNTY, WA

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE

X

3000-110-076 (R 7/11)

SUPERVISOR

CHECK ALL THAT APPLY:

UNIFORM WASHINGTON STATE

CASE / EVIDENCE NUMBER

15-001341

TOW / IMPOUND
AND INVENTORY RECORD

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD

- ☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

VEHICLE INFORMATION

VIN

1J9ICPC9119NT0887515

LICENSE

7713-XE

STATE

WA

YEAR

92

MAKE

FNU

MODEL

KWKMP

MILEAGE

☐ Digital

STYLE

MTR

COLOR

BLU/WH

☐ Report of Sale

DRIVER

NAME (LAST, FIRST, MI)

PRATT, RICHARD D

STREET ADDRESS

7618 McALISTER RD

CITY, STATE, ZIP CODE

SNODHOMISH, WA 98290

PHONE

DOB

5/21/54

REGISTERED OWNER

NAME (LAST, FIRST, MI)

SAME

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

LEGAL OWNER

NAME (LAST, FIRST, MI)

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 5/31/15 AT _____ (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE RAND R

TO REMOVE THIS VEHICLE FROM 20th ST NE & MACHIAS RD (TOWING FIRM) 2

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

DOL TOW TRUCK NO. 3

DATE

5-31-15

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> GLOVE BOX LOCKED	<input type="checkbox"/> FRONT SHADE DAMAGED AREA		
<input type="checkbox"/> KEYS []	<input type="checkbox"/> R FRONT		
<input type="checkbox"/> AUTO STEREO	<input type="checkbox"/> R SIDE		
<input type="checkbox"/> AUDIO TAPES / CD'S []	<input type="checkbox"/> R REAR		
<input type="checkbox"/> CB RADIO	<input type="checkbox"/> L FRONT		
<input type="checkbox"/> RADAR DETECTOR	<input type="checkbox"/> L SIDE		
<input type="checkbox"/> TRUNK LOCKED	<input type="checkbox"/> L REAR		
<input type="checkbox"/> SPARE TIRE	<input type="checkbox"/> REAR		
<input type="checkbox"/> JACK	<input type="checkbox"/> TOP		
<input type="checkbox"/> CHAINS	<input type="checkbox"/> UNDERCARRIAGE		
<input type="checkbox"/> OTHER _____	<input type="checkbox"/> OTHER _____		

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE

X SKILKOT 1132

BADGE NO.

132

COUNTY, WA

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE

X

CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

UNIFORM WASHINGTON STATE

TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

15-001341

Found 5 miles away

VEHICLE INFORMATION

VIN 1 HD 1 D J V 1 4 Y 6 2 3 0 9 7				
LICENSE 0D0831	STATE WA	YEAR 2000	MAKE HOND	MODEL FLHTC
<input type="checkbox"/> Report of Sale	MILEAGE <input type="checkbox"/> Digital unreadable	STYLE MTR	COLOR BLUE	

DRIVER

REGISTERED OWNER

LEGAL OWNER

NAME (LAST, FIRST, MI)
 PRATT, RICHARD D
 STREET ADDRESS
 7618 MCALLISTER RD
 CITY, STATE, ZIP CODE
 SNOWMISH, WA 98290
 PHONE
 5/21/54

NAME (LAST, FIRST, MI)
 STREET ADDRESS
 SAME
 CITY, STATE, ZIP CODE
 PHONE

NAME (LAST, FIRST, MI)
 STREET ADDRESS
 CITY, STATE, ZIP CODE
 PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 5/31/15 AT _____ PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE
 (24 HOUR)
 ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE R AND R

(TOWING FIRM)

TO REMOVE THIS VEHICLE FROM _____

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

DOL TOW TRUCK NO. 2

DATE 5.31.15

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> GLOVE BOX LOCKED <input type="checkbox"/> KEYS [] <input type="checkbox"/> AUTO STEREO <input type="checkbox"/> AUDIO TAPES / CD'S [] <input type="checkbox"/> CB RADIO <input type="checkbox"/> RADAR DETECTOR <input type="checkbox"/> TRUNK LOCKED <input type="checkbox"/> SPARE TIRE <input type="checkbox"/> JACK <input type="checkbox"/> CHAINS <input type="checkbox"/> OTHER _____	<input type="checkbox"/> FRONT <input type="checkbox"/> R FRONT <input type="checkbox"/> R SIDE <input type="checkbox"/> R REAR <input type="checkbox"/> L FRONT <input type="checkbox"/> L SIDE <input type="checkbox"/> L REAR <input type="checkbox"/> REAR <input type="checkbox"/> TOP <input type="checkbox"/> UNDERCARRIAGE <input type="checkbox"/> OTHER _____		

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE

X J. KILROY

BADGE NO.

132

COUNTY, WA

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE

X

SUPERVISOR

CHECK ALL THAT APPLY:

UNIFORM WASHINGTON STATE

CASE / EVIDENCE NUMBER

15-001341

TOW / IMPOUND
AND INVENTORY RECORDFaded
5/31/15
CWS

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

VEHICLE INFORMATION

VIN 1H1D11D1V144623097				
LICENSE 000831	STATE WA	YEAR 2000	MAKE HOND	MODEL ELITE
<input type="checkbox"/> Report of Sale		MILEAGE <input type="checkbox"/> Digital <i>unreadable</i>	STYLE MTR	COLOR BLUE

DRIVER

REGISTERED OWNER

LEGAL OWNER

NAME (LAST, FIRST, MI) PRATT, RICHARD D D	NAME (LAST, FIRST, MI)	NAME (LAST, FIRST, MI)
STREET ADDRESS 7618 MCALLISTER RD	STREET ADDRESS SAME	STREET ADDRESS
CITY, STATE, ZIP CODE SNOKMISH, WA 98290	CITY, STATE, ZIP CODE SAME	CITY, STATE, ZIP CODE
PHONE DOB 5/21/54	PHONE	PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 5/31/15 AT _____ PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE
 (24 HOUR)
 ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE RA AND RR (TOWING FIRM)

TO REMOVE THIS VEHICLE FROM _____

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE [Signature] DOL TOW TRUCK NO. 2 DATE 5-31-15

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> GLOVE BOX LOCKED <input type="checkbox"/> KEYS [] <input type="checkbox"/> AUTO STEREO <input type="checkbox"/> AUDIO TAPES / CD'S [] <input type="checkbox"/> CB RADIO <input type="checkbox"/> RADAR DETECTOR <input type="checkbox"/> TRUNK LOCKED <input type="checkbox"/> SPARE TIRE <input type="checkbox"/> JACK <input type="checkbox"/> CHAINS <input type="checkbox"/> OTHER _____	<input type="checkbox"/> FRONT SHADE DAMAGED AREA <input type="checkbox"/> R FRONT <input type="checkbox"/> R SIDE <input type="checkbox"/> R REAR <input type="checkbox"/> L FRONT <input type="checkbox"/> L SIDE <input type="checkbox"/> L REAR <input type="checkbox"/> REAR <input type="checkbox"/> TOP <input type="checkbox"/> UNDERCARRIAGE <input type="checkbox"/> OTHER _____		

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

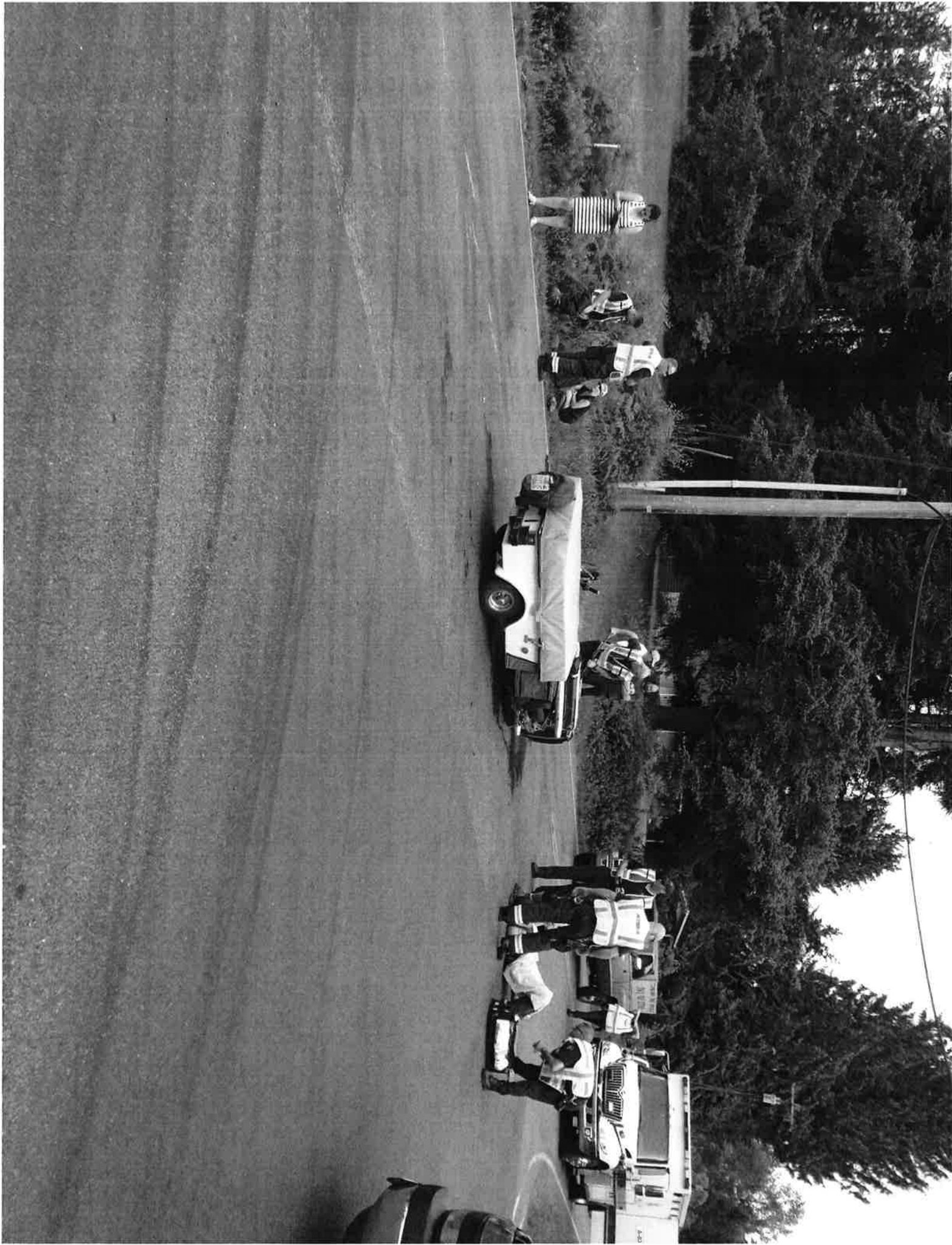
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE X 2KILROYBADGE NO. 132

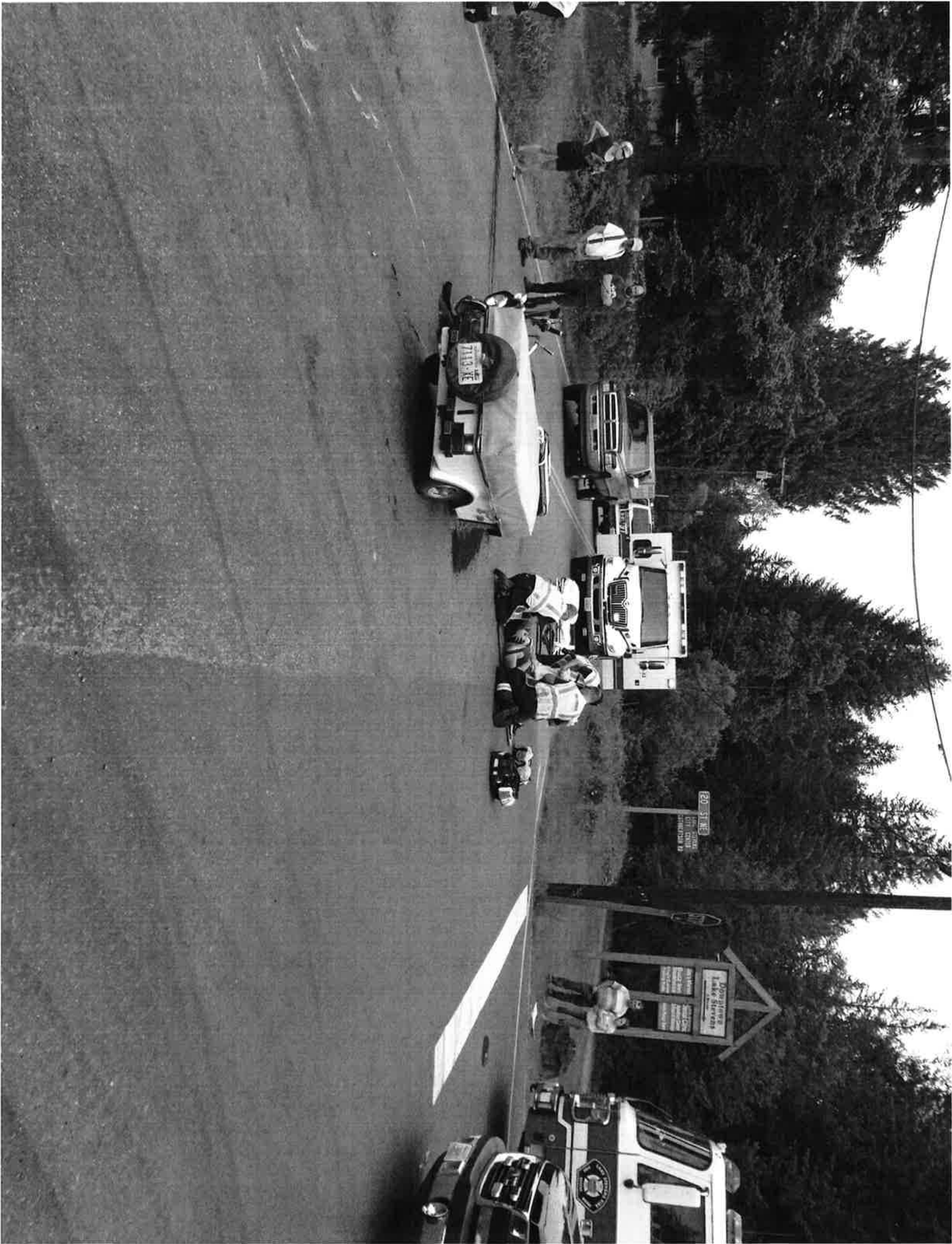
COUNTY, WA

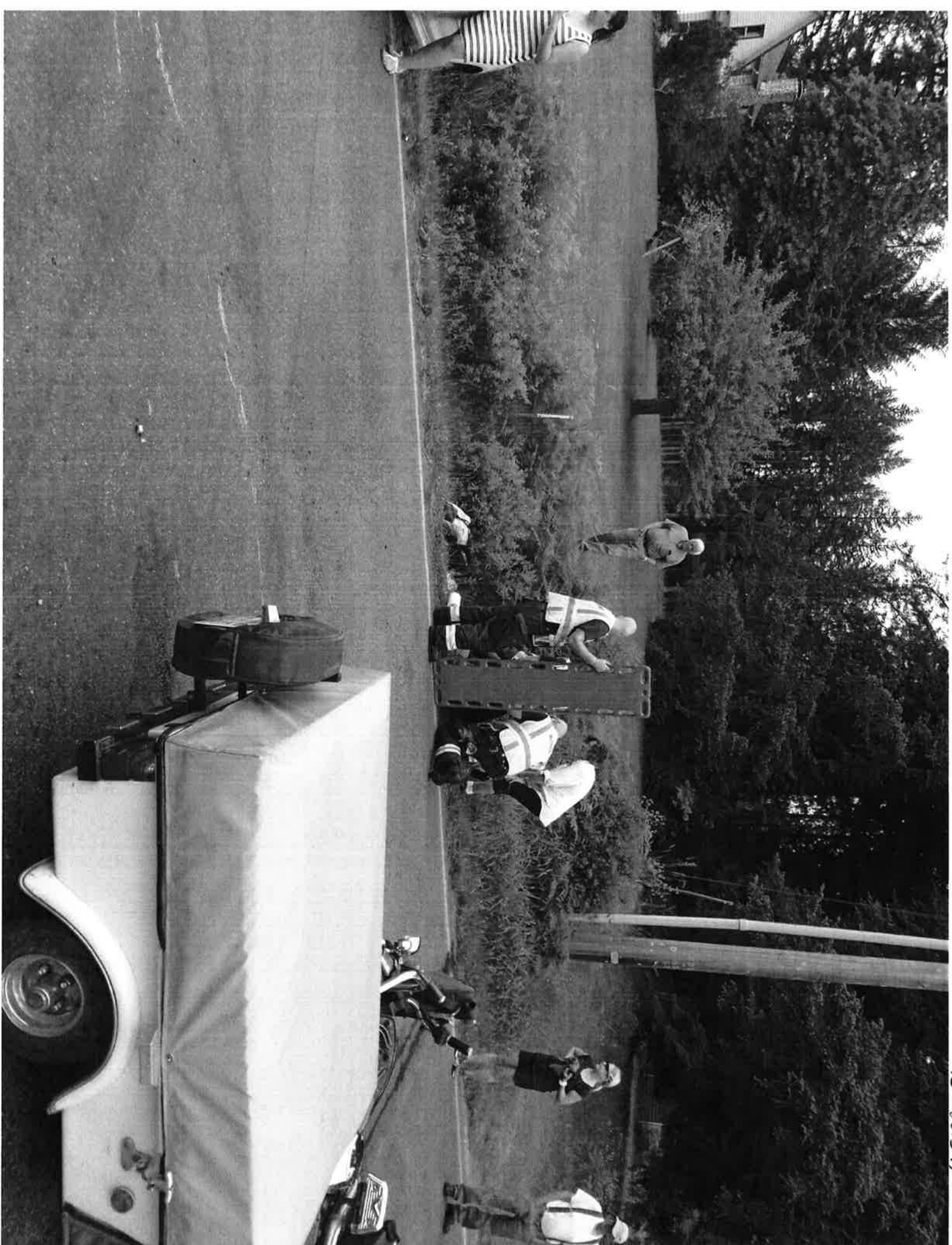
DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE X

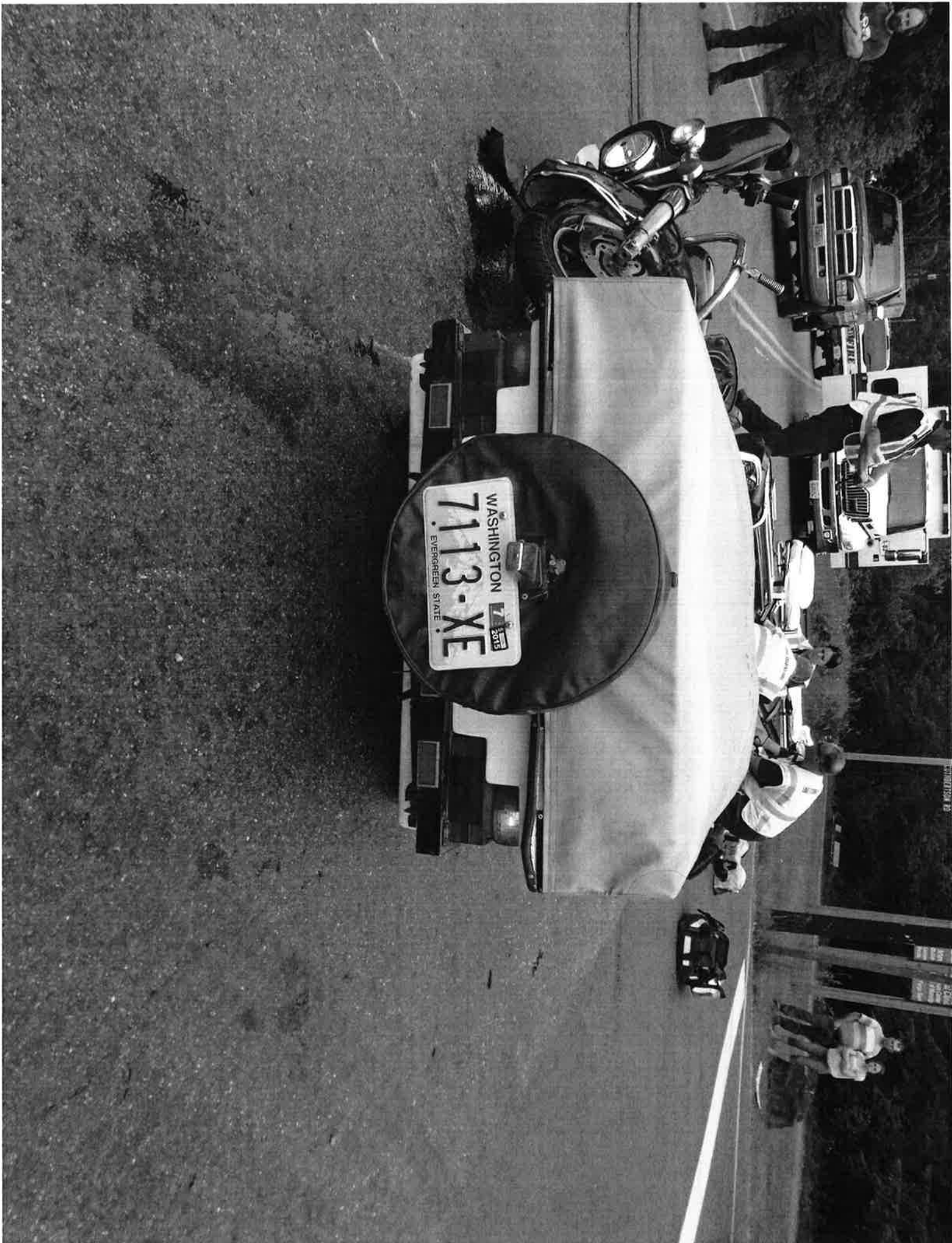


#15 - 001541

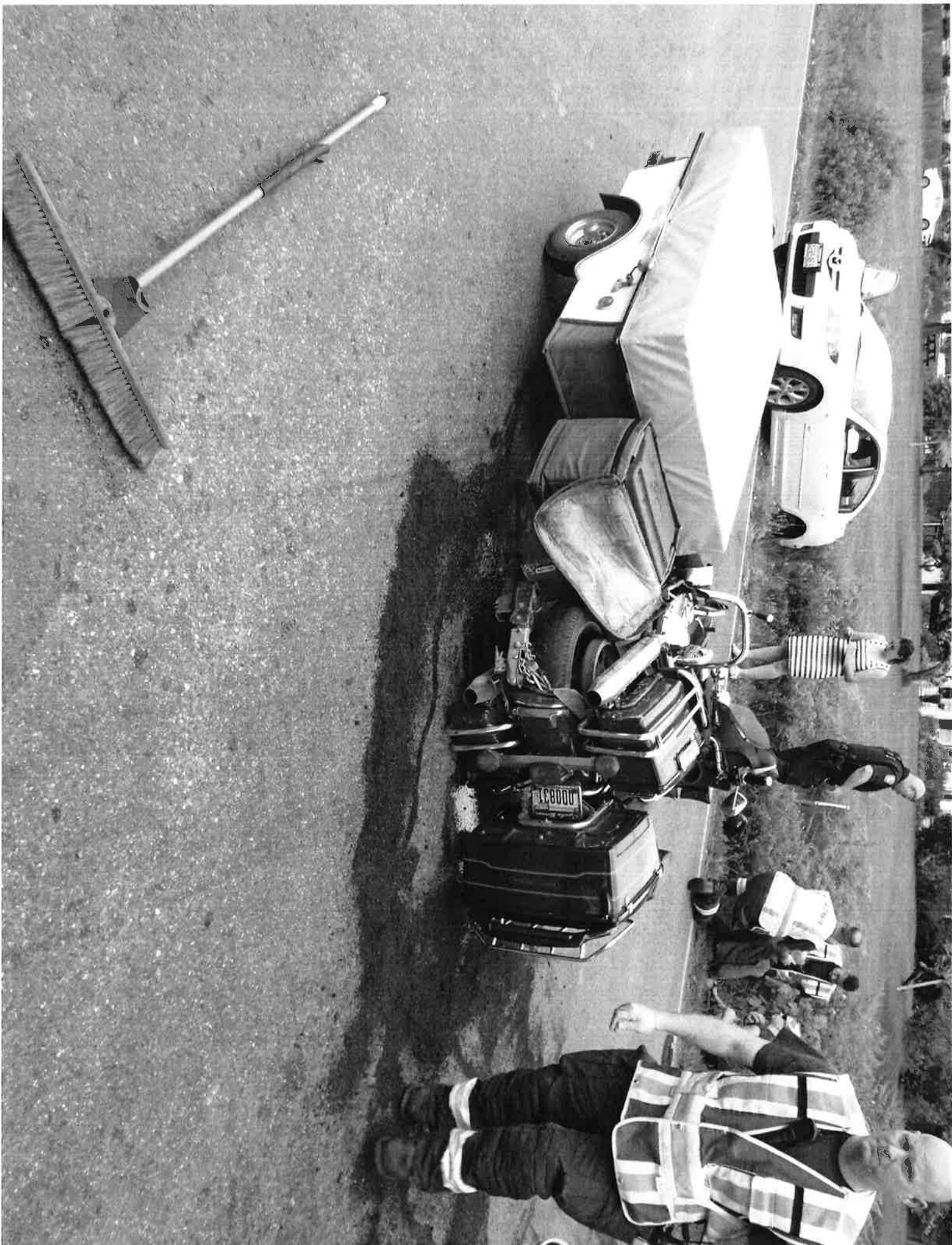




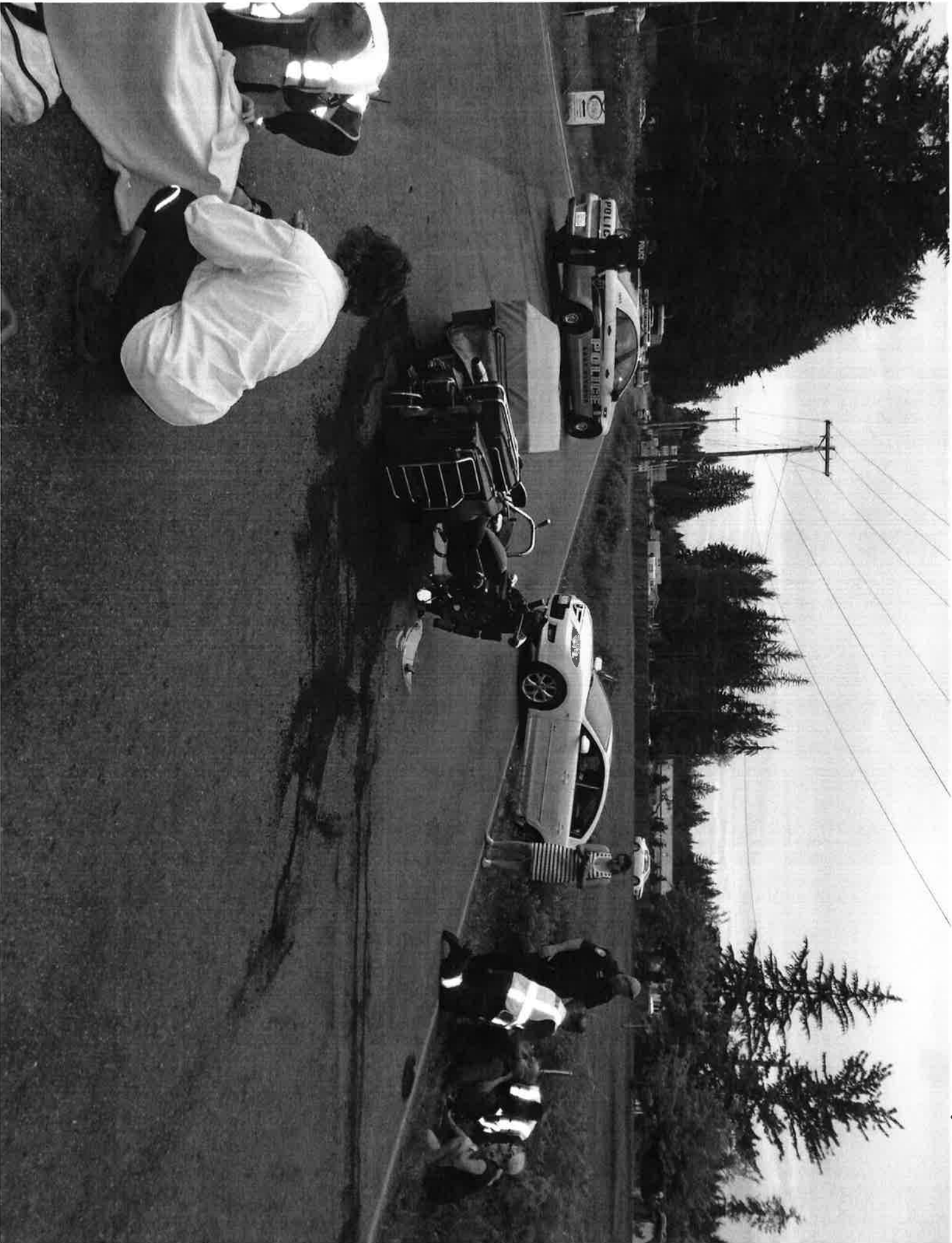
15 - 001341



15-001541

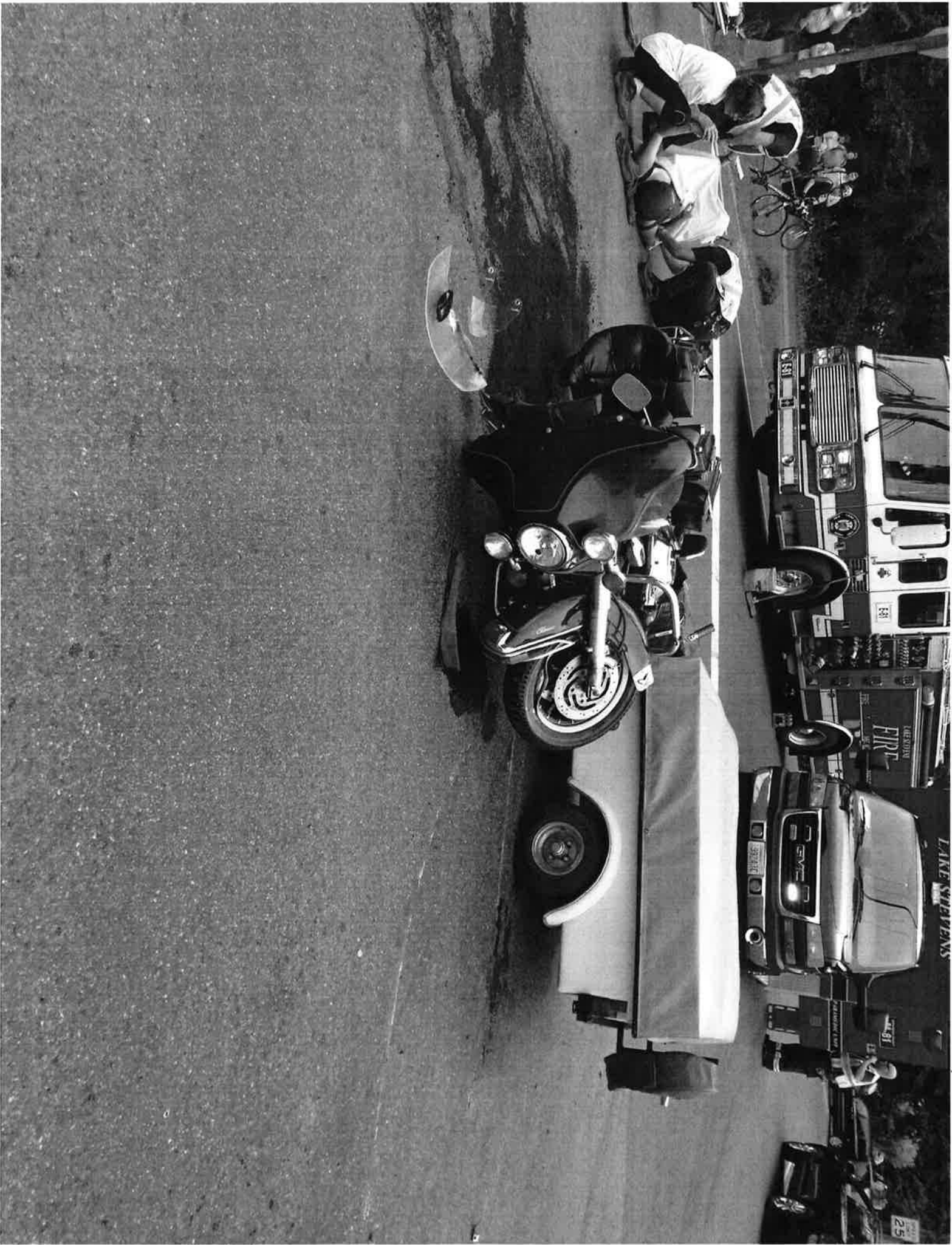


15-001341



15-000 391

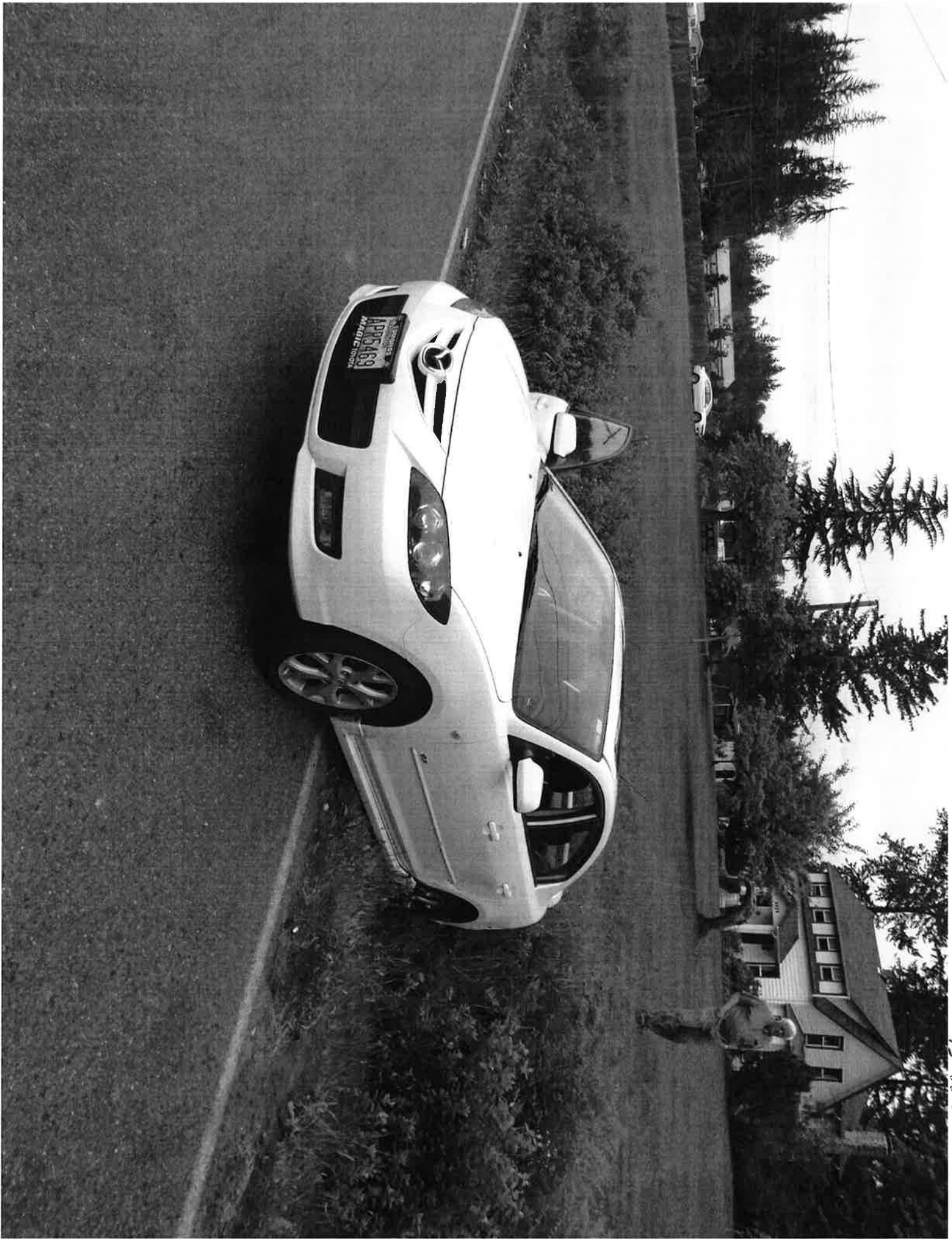




15-001341



15-008341

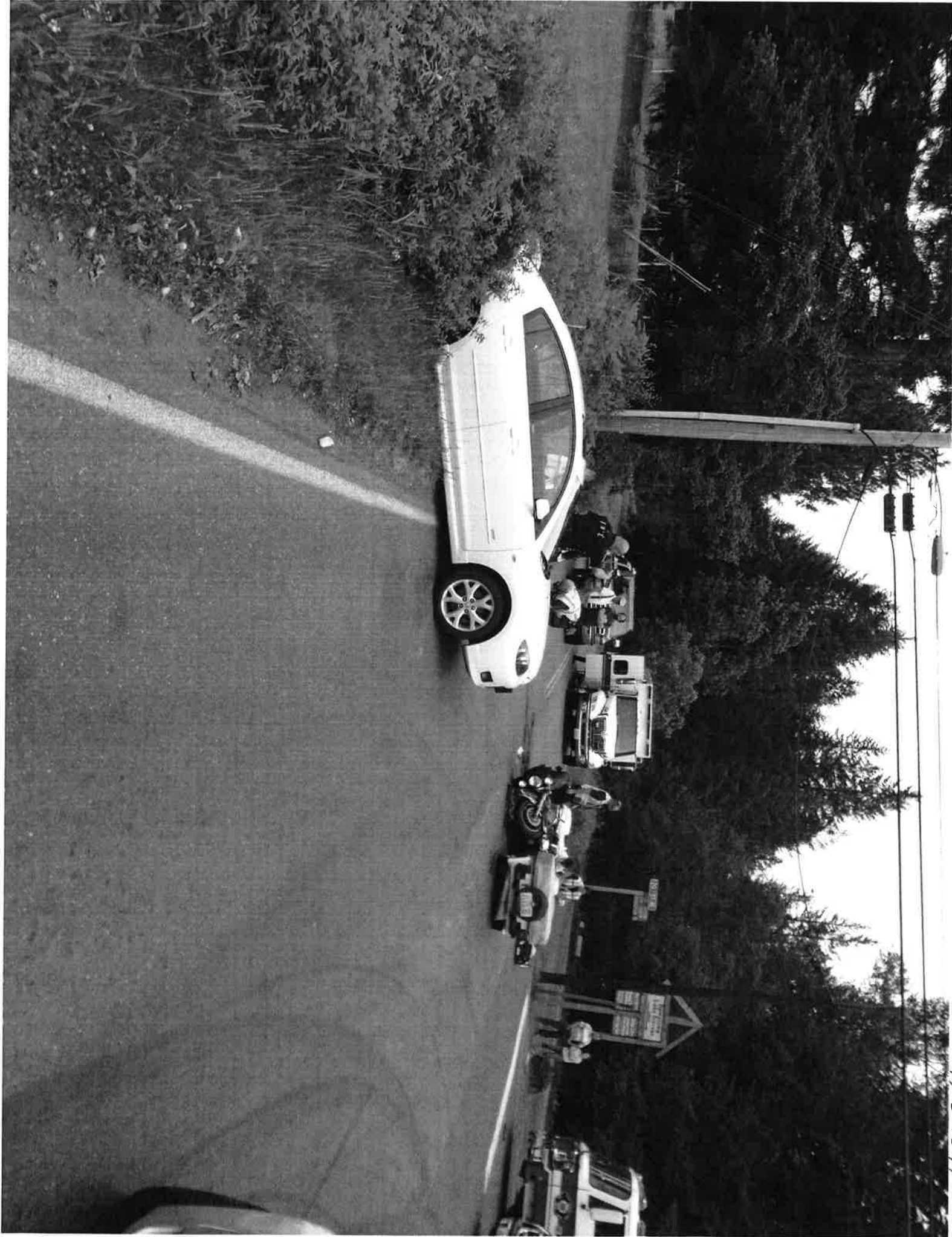




15-0015-1



15-001341



15-001341

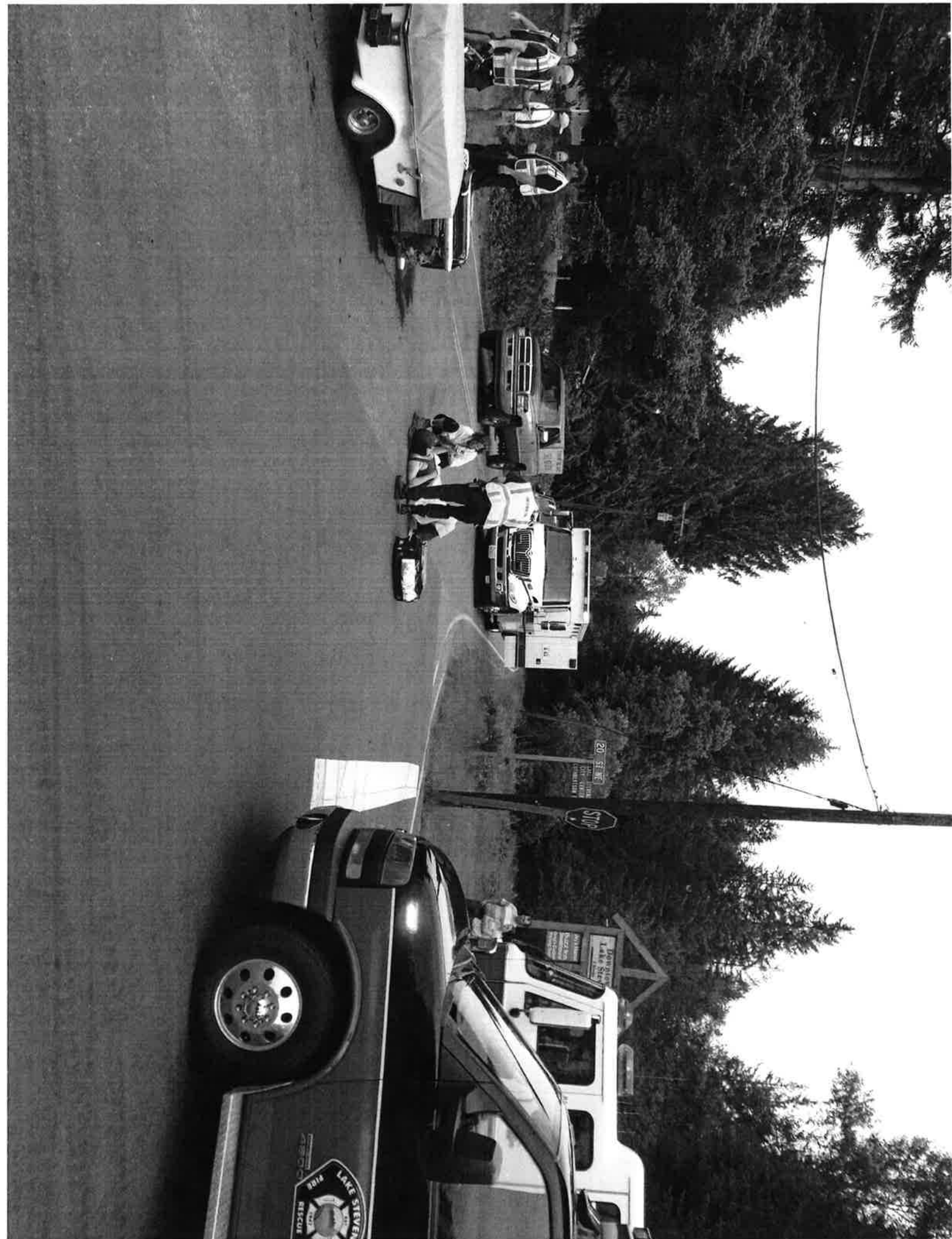


15-001341



15-001341





15-001291

LAKE STEVENS POLICE EVIDENCE UNIT				Primary Officer/Badge Number <i>R. MINER 195</i>				Case Number <i>15-001341</i>			
Type of Crime: Felony / Misdemeanor (Circle)				Type of Case: <i>COL</i>				Date/Time: <i>5/31/15</i>			
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING								*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfkg will be held for 60 days or 60 days past owner notification			

Case # 15-001341

Item # <i>1SK</i>	Item <i>CD w/ Photos</i>			Brand Name			Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)				
	Serial #		Where Found	Weight of Narcotic				
Action # <i>3</i>								
Owner's Name Address City State Zip Phone #							Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions								
Item #	Item			Brand Name			Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)				
	Serial #		Where Found	Weight of Narcotic				
Action #								
Owner's Name Address City State Zip Phone #							Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions								
Item #	Item			Brand Name			Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)				
	Serial #		Where Found	Weight of Narcotic				
Action #								
Owner's Name Address City State Zip Phone #							Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions								
Item #	Item			Brand Name			Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)				
	Serial #		Where Found	Weight of Narcotic				
Action #								
Owner's Name Address City State Zip Phone #							Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions								
Item #	Item			Brand Name			Storage Location	Disposition
	Brand/Model/Caliber			(Further Description)				
	Serial #		Where Found	Weight of Narcotic				
Action #								
Owner's Name Address City State Zip Phone #							Barcode goes here	
Owner Signature/Other remarks /additional information/ special instructions								

Evidence Control Use Only:					
Received by Evidence:		NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____		NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____		NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File

Incident History for: #SS15010552 Xref: #AG15001559

Case Numbers: \$SS15001341

Entered 05/31/15 16:28:31 BY SPDF24 SP0338
Dispatched 05/31/15 16:28:50 BY SPDP17 SP0174
Enroute 05/31/15 16:28:50
Onscene 05/31/15 16:29:34
Closed 05/31/15 17:30:10

Initial Type: COLP Initial Alarm Level: Final Alarm Level:

Final Type: COLP (COLLISION, PRIORITY) Pri: 1 Dispo: H

Police BLK: SS001 Fire BLK: AG1621 Map Page: 378A-6 Group: SS1 Beat: NORT

Src: T

Loc: 20 ST NE/N MACHIAS RD ,LKS (V)

Loc Info:

Name: MOORE ED

Addr: WITNESS

Phone: 3609132205

/1628 (SP0338) ENTRY ,2 MC'S DOWN, STILL, CAR IN DITCH
/1628 CROSS #AG15001559
/1628 (SP0174) DISPER 19D1 #SS120 BERNHARD, OFFICER (KERRY)
/1628 ASSTER 19S13 #SS95 MINER, SGT (ROBERT)
/1629 ASSTER 19D3 #SS132 KILROY, OFFICER (JOSH)
/1629 ASSTER 19D2 #SS131 WELLS, OFCR (CHAD)
/1629 ONSCNE 19D1
/1630 (SP0338) SUPP TXT: BOTH CONSC, WILL BE ONE MC M/F BOTH CONSC,
ADULT F W/SHOULDER PX, ADULT MALE IS NOW UP WALK
ING
/1630 (SP0401) SUPP TXT: NEW RP STATING GAS SMELL
/1630 (SP0339) SUPP TXT: THIS RP IS W/FEMALE MC RIDER CABN, UPPER ARM
IN PAIN. #2 MALE IS SITTING O N SIDE OF RD CABN
, POSS FX SHOULDER
/1630 (SP0338) SUPP NAM: MOORE ED,
ADR: WITNESS,
PHO: 3609132205
/1630 (SP0339) SUPP NAM: LORI,
PHO: 4253453653
/1630 (SP0174) ONSCNE 19S13
/1631 (SP0401) SUPP NAM: CHRISTIAN, STEPH PSRBY,
PHO: 4257377713
/1631 (SP0174) ONSCNE 19D2
/1631 ONSCNE 19D3
/1633 (*****) REMINQ 19S13 OD0831
/1633 (SP0174) REMINQ 19S13 LIC, 19S13, OD0831, , ,
/1633 (*****) REMINQ 19S13 7113XE
/1633 (SP0174) REMINQ 19S13 LIC, 19S13, 7113XE, , ,
/1633 (*****) REMINQ 19S13 APR5469
/1633 (SP0174) REMINQ 19S13 LIC, 19S13, APR5469, , ,
/1638 ASNCAS 19S13 \$SS15001341
/1641 (*****) REMINQ 19D2 PRATT. CAROLINE. K. 02151956. .
/1641 (SP0174) REMINQ 19D2 NAME, 19D2, PRATT, CAROLINE, K, 02151956, ,
/1641 (*****) REMINQ 19D2 PRATT. RICHARD. D. 05211954. .
/1641 (SP0174) REMINQ 19D2 NAME, 19D2, PRATT, RICHARD, D, 05211954, ,
/1642 ROTREQ 19D3 TOW 5308 LKS R AND R STAR TOWING INC
3606913411 , VEH AND MC W/TRAILER
/1643 (*****) REMINQ 19D2 PRATT. CAROLINE. K. 02131956. .
/1643 (SP0174) REMINQ 19D2 NAME, 19D2, PRATT, CAROLINE, K, 02131956, ,
/1648 \$PREMPT 19S13
/1648 ASSTOS 19S13 [20 ST NE/N MACHIAS RD , LKS]
#SS95 MINER, SGT (ROBERT)
/1651 (*****) REMINQ 19D2 PRATT. EVAN. B. 03261980. .

/1651	(SP0174)	REMINQ	19D2	NAME, 19D2, PRA11, EVAN, B, 03261980, ,
/1652	(SS95)	REMINQ	19S13	MDTVEH, 7113XE, , WA, , , , , , , , ,
/1655	(SP0174)	MISC	19D3	, R&R TOWING ENRT
/1657	(SS95)	REMINQ	19S13	MDTVEH, OD0831, , WA, , , , , , , , ,
/1658		REMINQ	19S13	MDTVEH, OD0831, , WA, , , , , , , , ,
/1704	(SP0174)	MISC	19D1	, TOW ONSC
/1711		\$PREMPT	19S13	
/1711		ASSTOS	19S13	[20 ST NE/N MACHIAS RD , LKS] #SS95 MINER, SGT (ROBERT)
/1711		OK	19S13	
/1722		CLEAR	19D2	
/1730		CLEAR	19S13	D/H
/1730		CLEAR	19D3	D/H
/1730		CLEAR	19D1	D/H
/1730		CLOSE	19D1	

IMPOUNDED VEHICLE ENTRY FORM

Type of Impound: (Check one)

Police Impound X

Private Impound _____ Repo _____

For Police Impound: Reason for Impound and Case Number (if available):
(DUI, DWLS, COL, ABAND, VEHR, EVIDENCE, Etc.)Case Number: 15-001341 Reason: IMPOUND

MKE/ (Circle One)

(EVI)

EVIP

EVR

ORI/ WA0311900LIC/ 7113XELIS/ WALIY/ 2015LIT/ mcVIN/ 1J9CP0919NT088755VYR/ 1992VMA/ FNJVMO/ KWKKMPVST/ MTRVCO/ white/BLUDATE OF IMPOUND/REPO: 5/31/15

TOW COMPANY NAME:

R+R5308

TOW COMPANY OCA/**

PHONE #:

360 6913411

**(For Repossession Company with no DOL Issued OCA, use 5999)

Address Taken From: 20th St / machias RdCity of Jurisdiction: LKS

For Repo:

Financial Institution:

Contact Person:

Phone #:

For Teletype:

Date: 05-31-2015Entered By: SP0401WAC #: 15V0059383

Checked By: _____

Checked Date: _____

CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH ___ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

UNIFORM WASHINGTON STATE

TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

15-001341

VEHICLE INFORMATION

VIN 1J19C1P09119W10818755				
LICENSE 7113-XE	STATE WA	YEAR 92	MAKE FNU	MODEL KWKKMP
<input type="checkbox"/> Report of Sale	MILEAGE <input type="checkbox"/> Digital <i>unreadable</i>	STYLE MTR	COLOR BLU/WH	

DRIVER

NAME (LAST, FIRST, MI)
 PRATT, RICHARD D
 STREET ADDRESS
 7418 McALISTER RD
 CITY, STATE, ZIP CODE
 SNOHOMISH, WA, 98290
 PHONE
 DOB
 5/21/54

REGISTERED OWNER

NAME (LAST, FIRST, MI)
 STREET ADDRESS
 SAME
 CITY, STATE, ZIP CODE
 PHONE

LEGAL OWNER

NAME (LAST, FIRST, MI)
 STREET ADDRESS
 CITY, STATE, ZIP CODE
 PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 5/31/15 AT _____ PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE RAND R

TO REMOVE THIS VEHICLE FROM 20th ST NE & MACHIAS RD (TOWING FIRM)

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE [Signature] DOI TOW TRUCK NO. 3 DATE 5-31-15

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> GLOVE BOX LOCKED <input type="checkbox"/> KEYS [] <input type="checkbox"/> AUTO STEREO <input type="checkbox"/> AUDIO TAPES / CD'S [] <input type="checkbox"/> CB RADIO <input type="checkbox"/> RADAR DETECTOR <input type="checkbox"/> TRUNK LOCKED <input type="checkbox"/> SPARE TIRE <input type="checkbox"/> JACK <input type="checkbox"/> CHAINS <input type="checkbox"/> OTHER _____	<input type="checkbox"/> FRONT <input type="checkbox"/> R FRONT <input type="checkbox"/> R SIDE <input type="checkbox"/> R REAR <input type="checkbox"/> L FRONT <input type="checkbox"/> L SIDE <input type="checkbox"/> L REAR <input type="checkbox"/> REAR <input type="checkbox"/> TOP <input type="checkbox"/> UNDERCARRIAGE <input type="checkbox"/> OTHER _____		

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.065)

OFFICER'S SIGNATURE X SKILROD 1132

BADGE NO. 132

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE X

3000-110-076 (R 7/11)

SUPERVISOR

IMPOUNDED VEHICLE ENTRY FORM

Type of Impound: (Check one)

Police Impound X

Private Impound _____ Repo _____

For Police Impound: Reason for Impound and Case Number (if available):
(DUI, DWLS, COL, ABAND, VEHR, EVIDENCE, Etc.)Case Number: 15-001341Reason: IMPOUND

MKE/ (Circle One)

EVI

EVIP

EVR

ORI/ WA0311900LIC/ 8D0831LIS/ WALIY/ 2016LIT/ MC

VIN/

VYR/ 2000VMA/ HDVMO/ FLHTCVST/ WAVCO/ BLUE

DATE OF IMPOUND/REPO:

05-31-2015

TOW COMPANY NAME:

R & R5308

TOW COMPANY OCA/**

PHONE#:

**(For Repossession Company with no DOL Issued OCA, use 5999)

Address Taken From:

20th St / Machias Rd

City of Jurisdiction:

LKS

For Repo:

Financial Institution:

Contact Person:

Phone #:

For Teletype:

Date: 05-31-15Entered By: SP0401WAC#: 15V0059378

Checked By: _____

Checked Date: _____

CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER
☐ REGISTERED OWNER MAY REDEM

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

UNIFORM WASHINGTON STATE
TOW / IMPOUND
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

15-001341

VEHICLE INFORMATION

VIN	1HD1DJV14Y4623097								
LICENSE	000831	STATE	WA	YEAR	2000	MAKE	HOND	MODEL	FLHTC
<input type="checkbox"/> Report of Sale		MILEAGE		unreadable		STYLE	MTR	COLOR	BLUE

DRIVER

NAME (LAST, FIRST, MI)
PRATT, RICHARD D
STREET ADDRESS
7618 McALLISTER RD
CITY, STATE, ZIP CODE
SNOWFLUSH, WA 98290
PHONE
DOB
5/21/54

REGISTERED OWNER

NAME (LAST, FIRST, MI)
STREET ADDRESS
CITY, STATE, ZIP CODE
PHONE

LEGAL OWNER

NAME (LAST, FIRST, MI)
STREET ADDRESS
CITY, STATE, ZIP CODE
PHONE

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 5/31/15 AT _____ (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE
ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE R AND R (TOWING FIRM)
TO REMOVE THIS VEHICLE FROM _____

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE [Signature] DOL TOW TRUCK NO. 2 DATE 5-31-15

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> GLOVE BOX LOCKED	<input type="checkbox"/> FRONT SHADE DAMAGED AREA		
<input type="checkbox"/> KEYS []	<input type="checkbox"/> R FRONT		
<input type="checkbox"/> AUTO STEREO	<input type="checkbox"/> R SIDE		
<input type="checkbox"/> AUDIO TAPES / CD'S []	<input type="checkbox"/> R REAR		
<input type="checkbox"/> CB RADIO	<input type="checkbox"/> L FRONT		
<input type="checkbox"/> RADAR DETECTOR	<input type="checkbox"/> L SIDE		
<input type="checkbox"/> TRUNK LOCKED	<input type="checkbox"/> L REAR		
<input type="checkbox"/> SPARE TIRE	<input type="checkbox"/> REAR		
<input type="checkbox"/> JACK	<input type="checkbox"/> TOP		
<input type="checkbox"/> CHAINS	<input type="checkbox"/> UNDERCARRIAGE		
<input type="checkbox"/> OTHER _____	<input type="checkbox"/> OTHER _____		

INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.050)

OFFICER'S SIGNATURE X [Signature]

BADGE NO. 132

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE X